

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

EPA ID NO:

U.S. ENVIRONMENTAL
PROTECTION AGENCY

1995 Hazardous Waste Report

FORM
ICIDENTIFICATION AND
CERTIFICATION

INSTRUCTIONS: Read the detailed instructions beginning on page 9 of the 1995 Hazardous Waste Report booklet before completing this form.

Sec. I Site name and location address. Complete A through H. Check the box ☐ in items A, C, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instruction page 10.

A. EPA ID No. Same as label <input type="checkbox"/> or → M O D 9 8 1 1 2 6 4 2 8		B. County St. Louis	
C. Site/company name Same as label <input type="checkbox"/> or → Union Electric Co. - Ray Complex		D. Has the site name associated with this EPA ID changed since 1993? <input type="checkbox"/> 1 Yes XX 2 No	
E. Street name and number. If not applicable, enter industrial park, building name, or other physical location description. Same as label <input type="checkbox"/> or → 4050 Bingham			
F. City, town, village, etc. Same as label <input type="checkbox"/> or → St. Louis		G. State Same as label M O	H. Zip Code Same as label 6 3 1 1 5 -

Sec. II Mailing address of site. Instruction page 10.

A. Is the mailing address the same as the location address? <input type="checkbox"/> 1 Yes (SKIP TO SEC. III) XX 2 No (GO TO BOX B)		
B. Number and street name of mailing address P.O. Box 149		
C. City, town, village, etc. St. Louis	D. State M O	E. Zip Code 6 3 1 6 6 -

Sec. III Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instruction page 10.

A. Please print: Last Name First name M.I. Pike Paul R.	B. Title Environmental Scientist	C. Telephone 3 1 4 5 5 4 - 2 3 8 8 Extension
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Sec. IV "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision by qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true and accurate. I understand that anyone who furnishes false or misleading information on this report or who omits material or information requested on the report may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including civil penalties)."

R00071611
RCRA Records Center

A. Please print: Last Name First name M.I. Lane James F.	B. Title Manager - Building Service
C. Signature <i>James F Lane</i>	D. Date of signature 0 2 2 0 9 6 MO. DAY YR.

Sec.V - Generator Status. Instruction pages 10, 12.

A. 1995 RCRA generator status

(CHECK ONE BOX BELOW)

- ☒ 1 LQG
☐ 2 SQG SKIP to SEC. VI
☐ 3 CESQG
☐ 4 Non generator (Continue to Box B)

B. Reason for not generating

(CHECK ALL THAT APPLY)

- ☐ 1 Never generated
☐ 2 Out of business
☐ 3 Only excluded or delisted waste
☐ 4 Only non-hazardous waste
☐ 5 Periodic or occasional generator
☐ 6 Waste minimization activity
☐ 7 Other (SPECIFY COMMENTS IN BOX BELOW)

Sec.VI - On-Site Waste Management Status. Instruction pages 13, 14.

A. Storage subject to RCRA permitting requirements

1

B. Treatment, disposal, or recycling subject to RCRA permitting requirements

1

C. RCRA-exempt treatment, disposal, or recycling

1

Sec.VII - Waste Minimization Activity during 1994 or 1995. Instruction pages 14, 15.

A. Did this site begin or expand a source reduction activity during 1994 or 1995?

- ☐ 1 Yes
☒ 2 No

B. Did this site begin or expand a recycling activity during 1994 or 1995?

- ☐ 1 Yes
☒ 2 No

C. Did this site systematically investigate opportunities for source reduction or recycling during 1994 or 1995?

- ☐ 1 Yes
☒ 2 No

D. Did any of the factors listed below delay or limit this site's ability to initiate new or additional source reduction activities in 1994 or 1995?
(CHECK YES OR NO FOR EACH ITEM)

- | Yes | No | |
|----------------------------|---------------------------------------|--|
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | a. Insufficient capital to install new source reduction equipment or implement new source reduction practices |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | b. Lack of technical information on source reduction techniques applicable to the specific production processes |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | c. Source reduction is not economically feasible: cost savings in waste management or production will not recover the capital investment |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | d. Concern that product quality may decline as a result of source reduction |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | e. Technical limitations of the production processes |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | f. Permitting burdens |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | g. Source reduction previously implemented - additional reduction does not appear to be technically feasible |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | h. Source reduction previously implemented - additional reduction does not appear to be economically feasible |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | i. Source reduction previously implemented - additional reduction does not appear to be feasible due to permitting requirements |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | j. Other (SPECIFY COMMENTS IN BOX BELOW) |

E. Did any of the factors listed below delay or limit the site's ability to initiate new or additional on-site or off-site recycling activities during 1994 or 1995?
(CHECK YES OR NO FOR EACH ITEM)

- | Yes | No | | Yes | No | |
|----------------------------|---------------------------------------|---|---------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | a. Insufficient capital to install new recycling equipment or implement new recycling practice | <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | g. Technical limitations of production processes inhibit shipments off-site for recycling |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | b. Lack of technical information on recycling techniques applicable to this site's specific production process | <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | h. Technical limitations of production processes inhibit on-site recycling |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | c. Recycling is not economically feasible: cost savings in waste management will not recover the capital investment | <input checked="" type="checkbox"/> 1 | <input type="checkbox"/> 2 | i. Permitting burdens inhibit recycling |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | d. Concern that product quality may decline as a result of recycling | <input checked="" type="checkbox"/> 1 | <input type="checkbox"/> 2 | j. Lack of permitted off-site recycling facilities |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | e. Requirements to manifest wastes inhibit shipments of off-site for recycling | <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | k. Unable to identify a market for recycled materials |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | f. Financial liability provisions inhibit shipments off-site for recycling | <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | l. Recycling previously implemented - additional recycling does not appear to be technically feasible |
| | | | <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | m. Recycling previously implemented - additional recycling does not appear to be economically feasible |
| | | | <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | n. Recycling previously implemented - additional recycling does not appear to be feasible due to permitting requirements |
| | | | <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | o. Other (SPECIFY COMMENTS IN BOX BELOW) |

Comments: This facility is filing due to the generation of a non-routine waste. This facility is not routinely a Large Quantity Generator.

